

FIRM NUMBER
NAME

APPLICATION FOR ORIGINAL OCCUPATIONAL LICENSE (PART C)

A. OWNERSHIP INFORMATION:

List true full name, title of individual, and date of birth; each partner (designate whether general or limited); each principal Officer and Director, or Stockholder of the corporation participating in the direction, control and management of the policy of the business; each Member and Manager of the limited liability company participating in the direction, control and management of the policy of the business; and each member of the association participating in the direction control and management of the association (attach separate sheet if additional space is needed).

PRINT TRUE FULL NAME (Last, First, Middle)	TITLE	DATE OF BIRTH

B. CERTIFICATION:

INSTRUCTIONS: Complete Section 1, 2, 3, 4, or 5 below depending on whether ownership is an individual, partnership, corporation, limited liability company, or association.

SECTION 1 – INDIVIDUAL

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

I further certify that I am the sole owner of (print firm name) _____
 and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE	TITLE	DATE
X		

SECTION 2 – PARTNERSHIP

We certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

We further certify that we are co-partners (print firm name) _____
 and that no other person is associated in the ownership of the business, and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE	SIGNATURE	SIGNATURE	DATE
X	X	X	

SECTION 3 – CORPORATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

I further certify that (print firm name) _____
 is incorporated in the State of _____ and our corporate number is _____
 and is authorized by the State of California to transact business in California, and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE OF CORPORATE OFFICER AUTHORIZED TO SIGN FOR CORPORATION	TITLE	DATE
X		

SECTION 4 – LIMITED LIABILITY COMPANY

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

I certify that (print firm name) _____
 is incorporated in the State of _____ and our LLC number is _____,
 and is authorized by the State of California to transact business in California, and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE OF MEMBER OR MANAGER AUTHORIZED TO SIGN FOR LLC	TITLE	DATE
X		

SECTION 5 – ASSOCIATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

I further certify that (print firm name) _____
 is an association and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE OF MEMBER AUTHORIZED TO SIGN FOR ASSOCIATION	TITLE	DATE
X		



**ORIGINAL APPLICATION FOR
 OCCUPATIONAL LICENSE
 (PART A)**

FOR DMV USE ONLY	
FIRM NUMBER	DATE APPLICATION RECEIVED
ACR NUMBER	DATE PERMIT ISSUED
ORIGINAL APPLICATION FEE	DATE PERMIT EXPIRES
NVMB FEE	REGION CC
FINGERPRINT FEE	INSPECTOR NAME/ID NUMBER
OTHER FEE	TOTAL FEE
SUSPENSE RECEIPT NUMBER	

A. TYPE LICENSE: (Check one box.)

- ☐ Dealer New
 ☐ Dealer-Wholesale Only
 ☐ Dismantler
 ☐ Transporter
 ☐ Distributor
☐ Dealer Used
 ☐ Dealer Autobroker
 ☐ Lessor-Retailer
 ☐ Manufacturer
 ☐ Remanufacturer

B. MAIN OFFICE: (Complete OL 21 for Branch Locations)

TRUE FULL NAME OF SOLE OWNER, ALL PARTNERS, CORPORATION, LIMITED LIABILITY COMPANY, OR ASSOCIATION

FIRM NAME	AREA CODE/TELEPHONE NUMBER ()
FIRM ADDRESS	
CITY	STATE ZIP CODE

C. CHECK THE VEHICLES TO BE SOLD, MANUFACTURED OR DISTRIBUTED AT THIS LOCATION:

NEW	<input type="checkbox"/> Automobile/Commercial*	<input type="checkbox"/> Motorcycle* (including Off-Highway)	<input type="checkbox"/> All-Terrain Vehicle*	<input type="checkbox"/> Motorhome*
	<input type="checkbox"/> Recreational Trailer*	<input type="checkbox"/> Trailer+	<input type="checkbox"/> Snowmobile*	
*OL 124 required.		+Letter of Authorization required.		
USED	<input type="checkbox"/> Automobile/Commercial	<input type="checkbox"/> Motorcycle (including Off-Highway)	<input type="checkbox"/> All-Terrain Vehicle	<input type="checkbox"/> Motorhome
	<input type="checkbox"/> Recreational Trailer	<input type="checkbox"/> Trailer	<input type="checkbox"/> Snowmobile	

D. PLATE(S) REQUEST: (Dealer-Wholesale Only — When you receive your license you may apply for dealer plates on the Application for License Plates OL 22.)

Enter number of plates only. The Licensing Inspector will complete county fees and total.

Auto* \$57.00 + \$ _____ = \$ _____ x _____ = \$ _____ **MOTORCYCLE \$59.00** + \$ _____ = \$ _____ x _____ = \$ _____
Each Plate County Fees No. of Plates Total Each Plate County Fees No. of Plates Total

*Also applies to trailers and motorhomes.

E. FOR DISMANTLER ONLY:

BOARD OF EQUALIZATION RESALE PERMIT NUMBER	CALIF. ENVIRONMENTAL PROTECTION AGENCY I.D. NUMBER	FRANCHISE TAX BOARD TAX I.D. NUMBER
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ALL PLATES ACQUIRED FROM VEHICLES WILL BE: ☐ DESTROYED ☐ TURNED INTO THE DEPARTMENT

- Is a storm water permit required for this location? ☐ Yes ☐ No
- Has an application been filed to obtain a storm water permit for this location? ☐ Yes ☐ No
- Has a hazardous materials business plan been filed for this location? ☐ Yes ☐ No
- Is a hazardous materials business plan required for this location? ☐ Yes ☐ No
- Does location meet all city and county zoning requirements? ☐ Yes ☐ No

If yes, attach the Zoning Verification for Vehicle Dismantler's License, form OL 62 completed by an official responsible for this location.

F. FOR MANUFACTURER OR REMANUFACTURER ONLY:

Attach pictures and detailed description adequate to identify vehicle to be manufactured. List the 17-digit VIN number or sample configuration from the Society of Automotive Engineers _____.

G. FOR DISTRIBUTOR ONLY:

Attach a copy of your distributor appointment from a California licensed Manufacturer of the product you will distribute.



FIRM NUMBER

NAME

H. FINANCIAL INSTITUTION BUSINESS ACCOUNT INFORMATION:

NAME OF FINANCIAL INSTITUTION

ACCOUNT NUMBER

ADDRESS OF FINANCIAL INSTITUTION

CITY

STATE

ZIP CODE

AREA CODE/TELEPHONE NUMBER

()

NAME OF PERSON AUTHORIZED TO DRAW FUNDS OR ISSUE CHECKS FROM ACCOUNT

IF ACCOUNT IS NOT CARRIED UNDER SAME NAME AS SHOWN ON THIS APPLICATION, UNDER WHAT NAME IS IT CARRIED?

I. PROPERTY USE APPROVAL:**(Must be completed by applicant. Excludes out-of-state Manufacturers and Distributors.)**Does location meet all city and county property use requirements? ☐ Yes ☐ No*If yes, attach the appropriate property use form completed by an official of the agency responsible for this location.***J. PROPERTY DATA:****PROPERTY IS: (Check one box.)**☐ Leased☐ Rented☐ Owned**APPROXIMATE SQUARE FEET**

Office Area

Building Area

Display Area

Total Area

LEASE OR RENTAL PERIOD

If property is leased or rented, complete the following and attach copies of the lease or rental agreement. If property is subleased, include a written authorization from the property owner.

PROPERTY OWNER'S FULL NAME

AREA CODE/TELEPHONE NUMBER

()

PROPERTY OWNER'S ADDRESS

CITY

STATE

ZIP CODE

K. APPLICANT CERTIFICATION:*Initials*

- I have an established place of business where I agree to keep all books and records relating to the business, available for, and open to inspection by any peace officer during regular business hours. _____
- I understand that all Report of Sale or Notice of Acquisition Books and Special Plates issued to me by the Department of Motor Vehicles are property of the State of California and must be surrendered to any authorized, identified Department employee on demand. _____
- The main place of business and all branches have offices and display or dismantling areas situated on the same property where business related to the type of license issued is transacted. (Except Wholesale-Only and Autobroker dealers.) _____
- The place of business is properly identified by a sign posted in a conspicuous place in each and every location. Such signs shall provide information relating to the business name and address so as to enable any person doing business with me to properly identify the business. (Except Wholesale-Only dealers.) _____
- I agree to notify the Department in writing immediately of any change in location of this business or any addition or deletion of branch offices and to provide simultaneously a complete description of the new location of this business and the name of the manager there. _____
- I agree to notify the Department in writing immediately of any change in the ownership or in the legal structure of this business and on request from the Department will submit new application papers properly reflecting the changes together with the required fees. _____
- I will maintain on file with the Department an authorization to sell each make of new vehicle that I sell and report on new vehicle reports of sale. _____

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINTED NAME OF SOLE OWNER, ALL PARTNERS, CORPORATE OFFICER, LLC MEMBER, OR ASSOCIATION REPRESENTATIVE

TITLE

SIGNATURE OF SOLE OWNER, ALL PARTNERS, CORPORATE OFFICER, LLC MEMBER, OR ASSOCIATION REPRESENTATIVE

DATE

X

PRINTED NAME OF INSPECTOR/NUMBER

INSPECTOR SIGNATURE

DATE



STATE OF CALIFORNIA
DEPARTMENT OF MOTOR VEHICLES

DEALER SURETY BOND
(Vehicle Code Section 11710)

DMV USE ONLY
OL OR ACCOUNT NUMBER
NAME

Bond Number _____
SURETY USE ONLY

KNOW ALL PERSONS BY THESE PRESENTS:

That we, _____
PRINCIPAL NAME(S) AND DBA

doing business as a dealer whose address for service is _____
DEALER SERVICE ADDRESS

_____ as PRINCIPAL, and _____
SURETY NAME

a corporation organized under the laws of _____
STATE OF INCORPORATION and authorized to transact a

general surety business in the State of California, whose address for service is _____
SURETY SERVICE ADDRESS

_____, as SURETY, are held and firmly bound to the People of the State of California in the penal sum of FIFTY THOUSAND DOLLARS (\$50,000), for which payment we bind ourselves, our heirs, executors, administrators, successors and assigns jointly and severally, firmly by these presents. The bond term shall begin on _____
BOND EFFECTIVE DATE

WHEREAS, section 11710, Vehicle Code, requires that the Principal file or have on file with the Department a bond in the sum of \$50,000 and this bond is executed and tendered in accordance therewith.

NOW THEREFORE, the conditions of the foregoing obligation are that if the Principal shall not practice any fraud or make any fraudulent representation which will cause a monetary loss to a purchaser, seller, financing agency, or governmental agency; and, shall not fail to comply with conditions set out in section 11711, then this obligation is to be void; otherwise it is to remain in full force and effect.

PROVIDED HOWEVER, this bond is issued subject to the following express conditions:

(1) This bond shall be deemed continuous in form and shall remain in full force and effect and shall run concurrently with the license period for which the license is granted and each and every succeeding license period or periods for which said Principal may be licensed, after which liability hereunder shall cease except as to any liability or indebtedness therefore incurred or accrued hereunder.

(2) This bond is executed by the Surety to comply with Article 1 (commencing with section 11700), Chapter 4, Division 5, Vehicle Code and chapter 2, title 14, part 2, Code of Civil Procedure and said bond shall be subject to all the terms and provisions thereof.

(3) The aggregate liability of the Surety hereunder on all claims whatsoever shall not exceed the penal sum of this bond in any event.

(4) This bond may be cancelled by the Surety in accordance with Article 13 (commencing with section 996.310), chapter 2, title 14, part 2, Code of Civil Procedure.

(5) The Surety, its successors and assigns, are jointly and severally liable on the obligations of the bond, chapter 2 (commencing with section 995.010), title 14, part 2, Code of Civil Procedure and Article 1 (commencing with section 11700), Chapter 4, Division 5, Vehicle Code.

(6) The Principal and Surety may be served with notices, papers and other documents under chapter 2 (commencing with section 995.010), title 14, part 2, Code of Civil Procedure at the addresses given above.

I certify (or declare) under penalty of perjury, under the laws of the State of California that I have executed the foregoing bond on behalf of the surety under an unrevoked power of attorney.

Executed in _____

On (Date) _____

X

SIGNATURE OF ATTORNEY-IN-FACT

PRINTED OR TYPED NAME OF ATTORNEY-IN-FACT

INSTRUCTIONS FOR COMPLETING THE SURETY BOND FOR AN OCCUPATIONAL LICENSE APPLICATION

The surety must complete the bond as follows to meet the department's regulatory requirements.

Bond Number: Enter the bond number. The bond number and the principal name should be included on all correspondence to the department.

Principal Name(s) and DBA (doing business as): Enter the true, full name of the Principal and DBA(s) which must match the names as presented on the application submitted to the department. When the Principal is a:

- ***Sole Owner*** — List the true, full name of that person and each DBA name(s).
- ***Partnership*** — List the true, full name of each partner and each DBA name(s).
- ***Limited Liability Company*** — List the true, full name of the limited liability partnership or company and each DBA name(s).
- ***Corporation*** — List the true, full name of the corporation and each DBA name(s) as filed and registered with the California Secretary of State; include the assigned registration number.
- ***Association*** — List the true, full name of the association and each DBA name(s).

A surety bond will not be accepted unless it is issued in the true, full name of the occupational licensee as presented on the application. When the name of the Principal is the same as the DBA name, only list the Principal's name.

Dealer Service Address: Enter the address at which the principal may be served with notices, papers, and other documents related to this bond.

Surety Name: Enter the true, full name as filed with the Department of Insurance. A surety issuing the bond must be an admitted surety insurer authorized to transact business in California.

State of Incorporation: Enter the state or country where the surety company's incorporation documents are filed.

Surety Service Address: Enter the address where legal documents may be served on the surety.

Bond Effective Date: Enter the month, day and year of the bond effective date.

Executed in: Enter the city and county where the bond is signed.

On (date): Enter the month, date and year when the bond is signed.

Signature of Attorney-in-Fact: Sign the true, full name of the person who represents and is authorized to sign for the surety company.

Printed or Typed Name of Attorney-in-Fact: Enter the true, full name of the person signing on behalf of the surety company.



STATE OF CALIFORNIA
DEPARTMENT OF MOTOR VEHICLES

**SURETY BOND OF MOTORCYCLE DEALER,
MOTORCYCLE LESSOR-RETAILER, ALL-TERRAIN VEHICLE DEALER,
OR WHOLESALE-ONLY DEALER (LESS THAN 25 VEHICLES PER YEAR)**
(Vehicle Code Sections 11612, 11710 and 11710.1)

DMV USE ONLY
OL OR ACCOUNT NUMBER
NAME

Bond Number _____
SURETY USE ONLY

KNOW ALL PERSONS BY THESE PRESENTS:

That we, _____
PRINCIPAL NAME(S) AND DBA

doing business as a dealer or lessor-retailer whose address for service is _____
DEALER/LESSOR-RETAILER SERVICE ADDRESS

_____ as PRINCIPAL, and _____
SURETY NAME

a corporation organized under the laws of _____ and authorized to transact a
STATE OF INCORPORATION

general surety business in the State of California, whose address for service is _____
SURETY SERVICE ADDRESS

_____, as SURETY, are held and firmly bound to the People of the State of California in the penal sum of TEN THOUSAND DOLLARS (\$10,000), for which payment we bind ourselves, our heirs, executors, administrators, successors and assigns jointly and severally, firmly by these presents. The bond term shall begin on _____
BOND EFFECTIVE DATE

WHEREAS, section 11612, or sections 11710 and 11710.1, Vehicle Code require that the Principal file or have on file with the Department a bond in the sum of \$10,000 and this bond is executed and tendered in accordance therewith.

NOW THEREFORE, the conditions of the foregoing obligation are that if the Principal shall not practice any fraud or make any fraudulent representation which will cause a monetary loss to a purchaser, seller, financing agency, or governmental agency; and, shall not fail to comply with conditions set out in section 11711, then this obligation is to be void; otherwise it is to remain in full force and effect.

PROVIDED HOWEVER, this bond is issued subject to the following express conditions:

(1) This bond shall be deemed continuous in form and shall remain in full force and effect and shall run concurrently with the license period for which the license is granted and each and every succeeding license period or periods for which said Principal may be licensed, after which liability hereunder shall cease except as to any liability or indebtedness therefore incurred or accrued hereunder.

(2) This bond is executed by the Surety to comply with Article 1 (commencing with section 11700), Chapter 4, Division 5, Vehicle Code and chapter 2, title 14, part 2, Code of Civil Procedure and said bond shall be subject to all the terms and provisions thereof.

(3) The aggregate liability of the Surety hereunder on all claims whatsoever shall not exceed the penal sum of this bond in any event.

(4) This bond may be cancelled by the Surety in accordance with Article 13 (commencing with section 996.310), chapter 2, title 14, part 2, Code of Civil Procedure.

(5) The Surety, its successors and assigns, are jointly and severally liable on the obligations of the bond, chapter 2 (commencing with section 995.010), title 14, part 2, Code of Civil Procedure and Article 1 (commencing with section 11700), Chapter 4, Division 5, Vehicle Code.

(6) The Principal and Surety may be served with notices, papers and other documents under chapter 2 (commencing with section 995.010), title 14, part 2, Code of Civil Procedure at the addresses given above.

I certify (or declare) under penalty of perjury, under the laws of the State of California that I have executed the foregoing bond on behalf of the surety under an unrevoked power of attorney.

Executed in _____

X

SIGNATURE OF ATTORNEY-IN-FACT

On (Date) _____

PRINTED OR TYPED NAME OF ATTORNEY-IN-FACT



INSTRUCTIONS FOR COMPLETING THE SURETY BOND FOR AN OCCUPATIONAL LICENSE APPLICATION

The surety must complete the bond as follows to meet the department's regulatory requirements.

Bond Number: Enter the bond number. The bond number and the principal name should be included on all correspondence to the department.

Principal Name(s) and DBA (doing business as): Enter the true, full name of the Principal and DBA(s) which must match the names as presented on the application submitted to the department. When the Principal is a:

- ***Sole Owner*** — List the true, full name of that person and each DBA name(s).
- ***Partnership*** — List the true, full name of each partner and each DBA name(s).
- ***Limited Liability Company*** — List the true, full name(s) of the limited liability partnership or company and each DBA name(s).
- ***Corporation*** — List the true, full name of the corporation and each DBA name(s) as filed and registered with the California Secretary of State include the assigned registration number.
- ***Association*** — List the true, full name of the association and each DBA name(s).

A surety bond will not be accepted unless it is issued in the true, full name of the occupational licensee as presented on the application. When the name of the Principal is the same as the DBA name, only list the Principal's name.

Dealer/Lessor-Retailer Service Address: Enter the address at which the principal may be served with notices, papers, and other documents related to this bond.

Surety Name: Enter the true, full name as filed with the Department of Insurance. A surety issuing the bond must be an admitted surety insurer authorized to transact business in California.

State of Incorporation: Enter the state or country where the surety company's incorporation documents are filed.

Surety Service Address: Enter the address where legal documents may be served on the surety.

Bond Effective Date: Enter the month, day and year of the bond effective date.

Executed in: Enter the city and county where the bond is signed.

On (date): Enter the month, date and year when the bond is signed.

Signature of Attorney-in-Fact: Sign the true, full name of the person who represents and is authorized to sign for the surety company.

Printed or Typed Name of Attorney-in-Fact: Enter the true, full name of the person signing on behalf of the surety company.

OCCUPATIONAL LICENSING SECTION

AUTHORIZATION TO RELEASE FINANCIAL INFORMATION

As an applicant for a dealer license with the Department of Motor Vehicles, I/we am/are required, pursuant to Section 11703.4 of the California Vehicle Code, to endorse an authorization for disclosure of account(s) relating to the operation of the dealership.

LICENSEE NAME

FIRM NAME

I/we hereby authorize release of financial information concerning the dealership account(s) as follows: account number; name(s) of person(s) establishing account; date each account established; name under which account(s) are held; name and address where statements are sent; name(s) of person(s) authorized to withdraw funds from account(s); and, copies of signature card(s).

I hereby release, discharge, exonerate the _____, their
FINANCIAL INSTITUTION
agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing and inspection of such documents, records and other information, and this release shall be binding on my legal representatives, heirs, and assignees.

This release will expire 120 days after the date signed.

A photocopy of this release is to be considered as valid as an original.

Signed: _____

Title: _____

Date: _____

Signed: _____

Title: _____

Date: _____

Signed: _____

Title: _____

Date: _____

Signed: _____

Title: _____

Date: _____



NAME
OL NUMBER

OCCUPATIONAL LICENSING SECTION

**PROPERTY USE VERIFICATION FOR
VEHICLE DEALER'S LICENSE**

Instructions: This form is to be completed (*in ink*) by an official of the agency responsible for property use in your area, pursuant to Government Code Section 65850, and submitted with your application for license to a department Inspector.

In connection with an application for a Vehicle Dealer's License to be submitted to the Department of Motor Vehicles by:

APPLICANT'S NAME		PRESENTLY ZONED	
BUSINESS NAME			
BUSINESS ADDRESS	CITY	STATE	ZIP CODE

I hereby certify that the property located above is (*check one of the following*):

- ☐ Approved for the operation of Vehicle Retail Sales
(office, sign, and display area **mandatory**).
- ☐ Approved for the operation of a Vehicle Dealer-Wholesale Only, no retail sales
(office **mandatory**).
- ☐ Approved for the operation of a Vehicle Autobroker, no retail sales
(office and sign **mandatory**).
- ☐ Not approved for the operation of a vehicle dealer business.

SIGNATURE X	TITLE
AGENCY	CITY, COUNTY, OR CITY AND COUNTY
DATE	AREA CODE/TELEPHONE NUMBER ()



APPLICATION FOR OCCUPATIONAL LICENSE

PERSONAL HISTORY QUESTIONNAIRE (PART B)

IMPORTANT — Read Carefully: Each person applying for an occupational license issued by the Department of Motor Vehicles must complete this questionnaire. Before you submit this questionnaire with your application, be sure that you have signed it and that you have fully answered each question. **Incorrect information is grounds for refusal to issue a license.**

A. APPLICANT INFORMATION: Type or Print YOUR TRUE FULL NAME

NAME (LAST, FIRST, MIDDLE)				BUSINESS AREA CODE/TELEPHONE NUMBER ()	
RESIDENCE ADDRESS (NUMBER AND STREET)		CITY	STATE	ZIP CODE	HOME AREA CODE/TELEPHONE NUMBER ()
DATE OF BIRTH	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	HAIR COLOR	EYE COLOR	HEIGHT	WEIGHT
DRIVER LICENSE/IDENTIFICATION NUMBER		ISSUING STATE	EXPIRATION DATE	SOCIAL SECURITY NUMBER	

B. EMPLOYMENT HISTORY FOR THE PAST THREE YEARS: Begin with your most recent job. List each separately.

FROM MO	YR	TO MO	YR	EMPLOYERS: NAMES, ADDRESSES, TYPE OF BUSINESS	JOB TITLE/DUTIES PERFORMED

(ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED)

C. EDUCATION:

	NAME AND ADDRESS OF SCHOOL	NUMBER OF YEARS	GRADUATED? YES OR NO	DATE COMPLETED
HIGH SCHOOL				
COLLEGE OR UNIVERSITY				
OTHER				

D. BACKGROUND INFORMATION:

1. Have you ever been known by or used any name other than the name appearing on this questionnaire? ☐ YES ☐ NO
 IF YES, LIST NAME(S) _____

2. Have you previously been or are you now licensed or have you ever applied in this state as a vehicle salesperson, representative, distributor, dealer, registration service, dismantler, manufacturer, remanufacturer, transporter, vehicle verifier, lessor-retailer, driving school owner, operator, or instructor, traffic violator school owner, operator or instructor or all-terrain vehicle safety training organization or instructor? ☐ YES ☐ NO
 IF YES, LIST LICENSE NUMBER _____



3. Have you ever had a business or occupational license issued by this department or an application for such license refused, revoked, suspended or subjected to other disciplinary action or were you ever a partner, managerial employee, officer, director, or stockholder in a firm licensed by this department, and the license was revoked, suspended or subject to other disciplinary action? ☐ YES ☐ NO

IF YES, LIST LICENSE NUMBER, TYPE OF LICENSE, ACTION BY DEPARTMENT, AND DATE OF ACTION.

4. Were you ever the holder of an occupational license issued by another state, authorizing the same or similar activities of a license, and that license was revoked or suspended for cause and was never reissued, or was suspended for cause, and the terms of suspension have not been fulfilled?..... ☐ YES ☐ NO

IF YES, DESCRIBE TYPE OF LICENSE, LIST LICENSE NUMBER, STATE LICENSE WAS ISSUED.

5. Have you ever had a civil judgment rendered against you? ☐ YES ☐ NO
If yes, was it a result of your activity under an occupational license issued by this department ☐ YES ☐ NO

IF YES, STATE AMOUNT AND WHETHER PAID OR UNPAID.

6. Were you ever a partner, managerial employee, officer, director, or stockholder in a firm that had a civil judgment rendered against it? ☐ YES ☐ NO
If yes, was it a result of your activity under an occupational license issued by this department ☐ YES ☐ NO

IF YES, STATE AMOUNT AND WHETHER PAID OR UNPAID.

7. Have you ever declared bankruptcy or were you ever a partner, managerial employee, officer, director, or stockholder in a firm that declared bankruptcy? ☐ YES ☐ NO

IF YES, GIVE DATE BANKRUPTCY FILED AND NAME AND LOCATION OF COURT OF JURISDICTION.

8. Do you currently have any criminal charges pending against you in any state or federal court?..... ☐ YES ☐ NO

IF YES, STATE THE COURT, CASE NUMBER AND THE NATURE OF THE CHARGES.

9. Have you ever: (If "YES", give details below.)

- (a) Been dismissed, fired, demoted, had your salary or compensation reduced or had any other adverse action taken against you, for any reason? ☐ YES ☐ NO
(b) Resigned from or quit a position while you were under investigation or after being informed discipline would be taken against you, or during an appeal from a disciplinary action? ☐ YES ☐ NO
(c) Been rejected or told you would not receive permanent or continued employment during any type of probationary or trial period on the job? ☐ YES ☐ NO
(d) If the termination, demotion or other adverse action from employment involved any civil or administrative case, please state court or agency and case number ☐ YES ☐ NO

DETAILS: (ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED)

10. ALL APPLICANTS:

EXCLUDING TRAFFIC OFFENSES, have you ever been CONVICTED, PLACED ON PROBATION, OR RELEASED FROM INCARCERATION FOLLOWING CONVICTION for any crime or offense, either Felony or Misdemeanor, of **ANY** Federal or State jurisdiction, **within the last ten years?** Read **Important Notice** on the next page and complete Section E..... ☐ YES ☐ NO

11. APPLICANTS FOR DRIVING SCHOOL OWNER/OPERATOR, TRAFFIC VIOLATOR SCHOOL OWNER/OPERATOR/INSTRUCTOR, ALL-TERRAIN VEHICLE SAFETY TRAINING ORGANIZATION OWNER/OPERATOR:

INCLUDING TRAFFIC OFFENSES, have you ever been CONVICTED, PLACED ON PROBATION, OR RELEASED FROM INCARCERATION FOLLOWING CONVICTION for any crime or offense, either Felony or Misdemeanor, of **ANY** Federal or State jurisdiction, **within the last ten years?** Read **Important Notice** on the next page and complete Section E..... ☐ YES ☐ NO

IMPORTANT NOTICE**IMPORTANT NOTICE****IMPORTANT NOTICE**

If you answered "Yes" to questions #10 or #11, list each separate offense, the date of conviction, offense, court of jurisdiction and disposition in the appropriate columns.

TO EXPEDITE A REVIEW OF YOUR APPLICATION, THE FOLLOWING EVIDENCE *MUST* BE SUBMITTED:

- Certified copy of the arresting agency report;
- Certified copy of the court documents.
- Penal Code Section 1203.4, expungement of your conviction(s);*
- Written receipts for payment of court-ordered restitution, fines and fees;
- Character letters attesting to your honesty and integrity by persons who know the circumstances of your conviction(s);
- Evidence of completion of a drug or alcohol abuse program.

*Even if you were pardoned, pled nolo contendere, or if the conviction was later expunged from the record of the court or set aside under Penal Code Section 1203.4, or any other federal or state law equivalent, you must disclose the conviction. If you are awaiting judgment and sentencing following entry of a plea or jury verdict, **you must still disclose the conviction.**

Failure to disclose all convictions, including those out-of-state or out-of-county **may result in the cancellation** of the temporary permit and may result in the refusal of the occupational license. Listing all conviction information may not necessarily preclude you from receiving a license.

Applicant Initials Required _____

FAILURE TO INITIAL WILL DELAY PROCESSING OF THIS APPLICATION

E. MISDEMEANOR OR FELONY CONVICTIONS:

DATE OF CONVICTION	CONVICTED OF	COURT OF JURISDICTION (FULL NAME AND ADDRESS)	DISPOSITION OF OFFENSE (DESCRIBE SENTENCE)			
			Amount Fined	Term of Probation	Jail or Prison Term	Date Released

(ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED)

FAILURE TO PROVIDE COMPLETE INFORMATION ON THIS APPLICATION, INCLUDING INFORMATION RELATING TO EMPLOYMENT HISTORY AND CRIMINAL CONVICTIONS, IS GROUNDS TO DENY ISSUANCE OF A LICENSE BY THE DEPARTMENT OF MOTOR VEHICLES.

F. APPLICANT CERTIFICATION:

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE

X

TITLE

DATE

IT IS IMPORTANT THAT YOU READ AND UNDERSTAND THE FOLLOWING INFORMATION

ADVISORY STATEMENT

The information required on this form pertains to eligibility for issuance of an occupational license. It is required under authority of Division 5 of the California Vehicle Code. Failure to provide the information is cause for refusal to issue an occupational license.

This information is public record, regularly used by law enforcement agencies, and is open to inspection by the public. Information contained in these records, classified as confidential or personal pursuant to the Information Practices Act of 1977 and the Public Records Act, is exempt from disclosure. Individuals are entitled to inspect or obtain copies of information contained in their records during regular office hours by prior arrangement.

The Occupational Licensing Branch, P.O. Box 932342, Sacramento, CA 94232-3420, is responsible for maintaining this information.

DISCLOSURE STATEMENT

SOCIAL SECURITY NUMBER COLLECTION DISCLOSURE — You are required by law to provide your social security number or your application will be denied.

Your social security number will be collected pursuant to California Business and Professions Code Section 30. It is used in the administration of occupational licensing laws to determine eligibility for issuance or renewal of an occupational license subject to the applicable provisions of the California Vehicle Code, California Business and Professions Code Sections 29.5, 30 and 31, as well as California Welfare and Institutions Code Section 11350.6. It is also used to aid in the collection of monies owed in connection with failure to pay a fine or failure to appear in court by an applicant; and to aid in the collection of monies owed by an applicant in connection with Aid to Families with Dependent Children, Child Support and Establishment of Paternity and Federal Payments for Foster Care and Adoption Assistance Programs, pursuant to 42 U.S.C. Section 405 and 42 U.S.C. Section 651 et seq.

Your social security number is not provided for public inspection; however, it will be provided in response to requests for information from state and federal agencies operating and involved in the collection of taxes and child support payments pursuant to 42 U.S.C. Section 601 et seq., and California Business and Professions Code Section 30.

Collection of your social security number is mandatory. Failure to furnish the information requested will result in denial of processing an application for issuance or renewal of an occupational license or permit, pursuant to Business and Professions Code Section 30, Subdivision(c).

Please be advised that you may not reapply for a license until a period of one year has elapsed since a previous license for which you are applying now has been revoked, refused, or denied pursuant to California Vehicle Code Sections 11810(d), 11903(c), and 11107(c).

**APPLICANT SHOULD RETAIN THIS PAGE FOR THEIR INFORMATION IF DOWNLOADED FROM THE INTERNET.
DO NOT SUBMIT WITH APPLICATION.**

APPOINTMENT OF DIRECTOR AS AGENT FOR SERVICE OF PROCESS

KNOW ALL MEN BY THESE PRESENTS: That I/We _____
 PRINCIPAL NAME(S) AND DBA(S)

As Principal, who has applied for a license as a _____, hereby appoint(s) the Director of Motor Vehicles
 TYPE LICENSE
 as principal's true and lawful agent upon whom all process may be served in any action, or actions which may hereafter be commenced against said principal, arising out of any claim for damages suffered by any firm, person, association, organization, corporation or limited liability partnership or company by reason of the violation by said principal of any of the terms and provisions of the California Vehicle Code or any condition of the bond.

Principal further stipulates and agrees that, when personal service of process upon principal cannot be made in this State after due diligence, that service can be made upon the Director of Motor Vehicles. In the event of the Director's absence from his/her office, that service can be made upon any employee of the State of California in charge of the Director's office and that such service of process shall be of the same legal force and effect as if served upon the principal personally.

The principal further stipulates and agrees that the agency created by said appointment shall continue for and during the period covered by any license that may be issued by the Department of Motor Vehicles and so long thereafter as the principal may be made to answer in damages for a violation of the California Vehicle Code, or any condition of principal's bond. The principal further agrees that for purposes of venue, whenever service is made upon the Director, the service shall be deemed to have been made upon principal in the county in which principal has or last had his/her established place of business.

IN WITNESS WHEREOF, the said principal has hereunto set his hand the _____
 DATE

X _____ SIGNATURE OF PRINCIPAL	X _____ SIGNATURE OF PRINCIPAL
X _____ SIGNATURE OF PRINCIPAL	X _____ SIGNATURE OF PRINCIPAL

CERTIFICATE OF ACKNOWLEDGMENT

State of California _____)

County of _____)
 COUNTY

On _____ before me, _____,
 (HERE INSERT NAME AND TITLE OF THE OFFICER)

personally appeared _____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

SIGNATURE OF NOTARY OR WITNESS*

(SEAL)

***NOTE:**

Officers and employees of the Department of Motor Vehicles (DMV) and the Department of the California Highway Patrol (CHP) are, for the purposes of this code, authorized to administer oaths and acknowledge signatures, for which no fee shall be charged. CVC section 18

OTHERWISE,

The instrument appointing the director as agent for the applicant for service of process shall be acknowledged by the applicant before a notary public.

CVC sections 11102(a)(5)(C), CVC 11202(a)(6)(C), 11403(d), 11710(d)



**ASSIGNMENT OF INSURED ACCOUNT TO DEPARTMENT OF MOTOR VEHICLES
EXECUTED PURSUANT TO DEMAND UNDER VEHICLE CODE
SECTION 11102, 11202, 11301, 11401, 11612, OR 11710, AND
CODE OF CIVIL PROCEDURE SECTION 995.710**

I/We _____ hereinafter referred to as *ASSIGNOR*, whose principal
place of business is located at _____
NAME OF APPLICANT(S) EXACTLY AS IT/THEY APPEAR ON APPLICATION

California do/does hereby assign and set over to the *Department of Motor Vehicles of the State of California*, hereinafter
referred to as the *DEPARTMENT* all right, title and interest of any kind whatsoever, owned or held by *Assignor* in and to the

insured account of *ASSIGNOR* in the _____ whose
(EXACT NAME OF BANK OR SAVINGS AND LOAN)

address is _____ California, as
NUMBER STREET CITY COUNTY

evidenced by an account in the amount of _____ dollars (\$) identified by

Account Number _____, which is delivered to the *DEPARTMENT* by *ASSIGNOR*. *ASSIGNOR* agrees and
stipulates that this assignment carries with it the right in and to the insurance of this account by the *Federal Deposit Insurance
Corporation* or the *Federal Savings and Loan Insurance Corporation*. This assignment is given to the *DEPARTMENT* under
the provisions of Section 11102, 11202, 11301, 11401, 11612 or 11710 of the Vehicle Code and Section 995.710 Code of
Civil Procedure, is binding on *ASSIGNOR*, his/her/their heirs, administrators, successors, and assigns, jointly or severally,
and is conditioned that *Assignor* has made, or is about to make application to the *DEPARTMENT* for a license under Division
5, of the Vehicle Code to act as a driving school owner, traffic violator school owner, all-terrain vehicle safety training organi-
zation, registration service, vehicle verifier, lessor-retailer, dealer or remanufacturer of vehicles.

Dated this _____ of _____, at _____ California.
DAY MONTH YEAR (COMMUNITY)

By _____
(TYPE NAME OF APPLICANT EXACTLY AS SHOWN ABOVE)

(SIGNATURE OF PERSON AUTHORIZED TO SIGN FOR APPLICANT)

(TYPE NAME AND TITLE OF SIGNER (OWNER, PARTNER, CORPORATE OFFICER))

First Endorsement and Receipt for Notice of Assignment

Receipt is hereby acknowledged to the *Department of Motor Vehicles of the State of California*, of written notice of the
assignment to said *DEPARTMENT* of the above identified account. We have noted our records to show the interest of the
DEPARTMENT in said account as shown in any by the assignment above. We have retained a copy of this document. We
hereby certify that we have not received any notice of lien, encumbrance, hold, claim, or other obligation against the above
identified account prior to its assignment to the *DEPARTMENT*. We agree to make payment as required by the Vehicle Code
in accordance with the banking or savings and loan laws applicable to the bank or association. We further agree that, not
withstanding any provision of law to the contrary, the full sum of \$ _____ shall be available for payment to the
DEPARTMENT and shall not be reduced to pay penalties for early withdrawal or other cause, or to pay service or other fees
to this institution.

Dated this _____ of _____, at _____ California.
DAY MONTH YEAR (TYPE NAME OF BANK OR SAVINGS AND LOAN ASSOCIATION)

By _____ Title: _____
(SIGNATURE OF OFFICER OF BANK OR ASSOCIATION) (TYPE TITLE OF OFFICER)

Second Endorsement — Receipt for Notice of Assignment and Direction to Pay Earnings

Receipt is hereby acknowledged of the assignment above and the account identified in the assignment above. The bank or
savings and loan association named in the assignment above is hereby authorized and directed to pay any earnings on the
above identified account to the above named *ASSIGNOR*.

Dated this _____ of _____, at Sacramento, California.
DAY MONTH YEAR

DEPARTMENT OF MOTOR VEHICLES
By _____
Manager, Occupational Licensing





NOTICE OF ACKNOWLEDGMENT

(Submit in Duplicate)

TO: Director of Motor Vehicles

DEALER, REMANUFACTURER, LESSOR-RETAILER, REGISTRATION SERVICE, VEHICLE VERIFIER, DRIVING SCHOOL OWNER, TRAFFIC VIOLATOR SCHOOL, ALL-TERRAIN VEHICLE SAFETY TRAINING ORGANIZATION NO. ASSIGNED

I/WE _____

TYPE NAME(S) OF APPLICANT(S) EXACTLY AS APPEARS ON APPLICATION

having made, or about to make, application for a driver school owner's, registration service, all-terrain vehicle safety training organization, traffic violator school owner's, vehicle verifier's, lessor-retailer's, dealer's, or remanufacturer's license under the provisions of Chapter 1, 1.5, 2, 2.5, 3.5, or 4, Division 5 of the California Vehicle Code, make the following election:

- ☐ Elect to post lawful money of the United States in the amount of twenty-five thousand dollars (\$25,000.00) for registration service; five thousand dollars (\$5,000.00) for a vehicle verifier's license; ten thousand dollars (\$10,000.00) for a motorcycle dealer license, wholesale-only dealer license (less than 25 vehicles per year), lessor-retailer's license or driving school owner's license; fifty thousand dollars (\$50,000.00) for a dealer's license or remanufacturer's license; two thousand dollars (\$2,000.00) for traffic violator school owner's or all-terrain vehicle safety training organization's license, with the Department of Motor Vehicles in lieu of a surety bond in like amount as provided for in the California Vehicle Code and Code of Civil Procedure.
- ☐ Elect to post under provisions of the California Vehicle Code and the Code of Civil Procedure, a Certificate of Deposit or a full paid certificate in my/our name, issued by a bank or savings and loan association authorized to do business in the State of California and insured by the Federal Deposit Insurance Corporation or the Federal Savings and Loan Insurance Corporation and payable to the Department of Motor Vehicles in the amount of twenty-five thousand dollars (\$25,000.00) for registration service; five thousand dollars (\$5,000.00) for a vehicle verifier's license; ten thousand dollars (\$10,000.00) for a motorcycle dealer license, wholesale-only dealer license (less than 25 vehicles per year), lessor-retailer's license or driving school owner's license; fifty thousand dollars (\$50,000.00) for a dealer's license or remanufacturer's license; two thousand dollars (\$2,000.00) for traffic violator school owner's or all-terrain vehicle safety training organization's license, with the Department of Motor Vehicles in lieu of a surety bond in like amount as provided for in the California Vehicle Code and Code of Civil Procedure. Said Certificate has been issued by:

EXACT NAME OF BANK OR SAVINGS AND LOAN ASSOCIATION

NUMBER	STREET	CITY	STATE	ZIP CODE
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ACCOUNT OR CERTIFICATE NUMBER

- ☐ Elect to post, under the provisions of the California Vehicle Code, with the Department of Motor Vehicles, evidence of a deposit of twenty-five thousand dollars (\$25,000.00) for registration service; five thousand dollars (\$5,000.00) for a vehicle verifier's license; ten thousand dollars (\$10,000.00) for a motorcycle dealer license, wholesale-only dealer license (less than 25 vehicles per year), lessor-retailer's license or driving school owner's license; fifty thousand dollars (\$50,000.00) for a dealer's license or remanufacturer's license; two thousand dollars (\$2,000.00) for traffic violator school owner's or all-terrain vehicle safety training organization's license, or an investment certificate in like amount, in a bank or savings and loan association authorized to do business in the State of California and insured by the Federal Deposit Insurance Corporation or the Federal Savings and Loan Insurance Corporation, together with a written assignment of said deposit of certificate to the Department of Motor Vehicles. Said evidence of deposit or investment certificate was issued by:

EXACT NAME OF BANK OR SAVINGS AND LOAN ASSOCIATION

NUMBER	STREET	CITY	STATE	ZIP CODE
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ACCOUNT OR CERTIFICATE NUMBER

I/We acknowledge that the certificate or deposit will be retained by the Department of Motor Vehicles during the period the vehicle dealer's, remanufacturer's, lessor-retailer's, registration service, vehicle verifier's, driving school owner's, traffic violator school owner's, or all-terrain vehicle safety training organization's license is in effect and will be further retained by the Department until it becomes returnable under the provisions of the Vehicle Code and Section 995.770 of the Code of Civil Procedure. At such time, upon demand, it shall be returned to

NAME(S)

SIGNATURE(S) OF APPLICANT(S) OR PERSON AUTHORIZED TO SIGN FOR APPLICANT(S)

TYPE NAME(S) AND TITLE(S) OF SIGNER(S), OWNER(S), PARTNER(S), OR CORPORATE OFFICER(S)





STATE OF CALIFORNIA
DEPARTMENT OF MOTOR VEHICLES

A Public Service Agency

OL NUMBER

CASH BOND

Assignment to the Director of Motor Vehicles

I/We _____
NAME OF APPLICANT(S), EXACTLY AS IT/THEY APPEAR ON APPLICATION
hereinafter referred to as **Assignor**, whose principal place of business is located at

_____ California
do/does hereby assign and set over to the **Director of Motor Vehicles of the State of California**,
hereinafter referred to as **Director**, all right, title and interest of any kind whatsoever, owned or held

by **Assignor** in the cash sum of _____ dollars

(\$ _____) identified by Receipt Number _____, which
is delivered to the Director pursuant to Section 11102, 11202, 11301, 11401, 11612 or 11710 of the
Vehicle Code and Section 995.710 Code of Civil Procedure. This assignment is binding as **Assignor**, his/
her heirs, administrators, successors, and assigns, jointly or severally, and is conditioned that **Assignor**
has made, or is about to make application to the **Director** for a license under Chapter 1, 1.5, 2, 2.5, 3.5
or 4, Division 5, of the Vehicle Code to act as a dealer, lessor-retailer, registration service, vehicle
verifier, remanufacturer, driving school owner, traffic violator school owner, or all-terrain vehicle safety
training organization.

Assignor understands that the **Director** is not authorized to refund said cash deposit until three
years from the expiration date upon which a licensee ceases to be licensed by the **Director**, or ceases to
do business as a dealer, lessor-retailer, registration service, vehicle verifier, remanufacturer, driving
school owner, traffic violator school owner, or all-terrain vehicle safety training organization.

Assignor further understands that the **Director** is authorized to reduce the sum of said cash deposit
to the extent of all claims owing the **Department of Motor Vehicles** arising from **Assignor's** business
activities as a dealer or lessor-retailer, registration service, vehicle verifier, remanufacturer, driving
school owner, traffic violator school owner, or all terrain vehicle safety training organization, and
reasonable attorney fees and administrative costs incurred in processing claims against such cash
deposit; that the reduction of such deposit by any amount is grounds for automatic suspension of the
occupational license under the provisions of Sections 11102, 11202, 11301, 11401, 11612 and 11710 of
the Vehicle Code, until such time as the cash deposit is restored to its original amount.

Dated this _____, at
DAY MONTH YEAR

COUNTY

TYPE NAME OF APPLICANT EXACTLY AS SHOWN ABOVE

BY: _____
SIGNATURE OF PERSON AUTHORIZED TO SIGN FOR APPLICANT

TYPE NAME AND TITLE OF SIGNER (OWNER, PARTNER, CORPORATE OFFICER)

